

**Attachment C**  
**Long-Term Care Planning Grant Proposal**  
**SOUTHWESTERN CARE MANAGEMENT COALITION**

**Applicant Organization and Contact:** For the purpose of this RFI/RFP, our organization will be known as the Southwestern Care Management Coalition, herein referred to as the Coalition. The partnering counties that have agreed to submit this proposal include: Crawford, Grant, Green, Iowa, Juneau, Lafayette, Richland, and Sauk. In addition, a private, for-profit corporation called Community Care In Action, LLC. (CCIA) has expressed a strong interest in being part of the planning process. The primary contact person for CCIA is Gerry Born, President. The primary contact person for the Coalition is Randy Jacquet, LCSW, Director, Richland County Health & Human Services, 221 W. Seminary Street, Richland Center, WI 53581; (608) 647-8821 ext. 222; (608) 647-6611 FAX; [jacquetr@co.richland.wi.us](mailto:jacquetr@co.richland.wi.us).

**Planning Grant Request:** The Coalition is requesting a planning grant in the amount of \$100,000.

**Planning Outcomes:**

- Identify and implement a method to continually seek consumer input into the development process.
- Develop a formal business relationship with Coalition partners to implement a managed care model of service to include the development and implementation of a comprehensive governance structure and organization/operational structure. The Coalition will need to look at all forms of governance options and organization/operational structures that would best serve the needs of the region.
- Identify the scope of managed care services—At a minimum, develop a Family Care model while exploring phasing in acute and primary care as well as SSI managed care.
- Create a three-year business and solvency plan based on historic data of utilization in each county and projection of potential members including those on wait lists.
- Define the business requirements for a financial management and information technology system that will be utilized by all partnering counties.

- Identify and be prepared to implement supports necessary for functional and financial eligibility determination for enrollment functions (ADRC and Economic Support).
- Develop a comprehensive implementation plan for the operation of a managed care entity that would include: business functions, timeline for reaching entitlement based on State funding, care management functions, quality functions, provider network, and Resource Centers.

**Area:** As detailed in the chart below, the total population of the Coalition is approximately 250,000 with estimated Medical Assistance eligibles of just over 7,000.

COUNTY	Total Population	Estimated MA Eligibles	Estimated Physically Disabled Population	Estimated Developmentally Disabled Population	Estimated Elderly Population
Crawford	17,360	692	180	235	277
Grant	50,360	1783	464	606	713
Green	35,130	853	222	290	341
Iowa	23,630	511	133	174	204
Juneau	25,540	917	238	312	367
Lafayette	16,330	359	93	122	144
Richland	18,200	691	180	235	276
Sauk	58,430	1458	379	496	583
<b>Total</b>	<b>244,980</b>	<b>7,264</b>	<b>1,889</b>	<b>2,470</b>	<b>2,905</b>

**Background:** All eight counties in the Coalition have historically provided long-term care in the form of the COP and Waiver programs. These programs have a proven history as can be noted by the expansion of these waivers over the past 20+ years. Through their role in adult protective services, counties are responsible for some of the most challenging members that would be served by the care management organization. The Coalition will look to build upon their expertise in long-term care to develop a successful managed care system. All of the partners in the Coalition look forward to the elimination of waiting lists and the positive outcomes that could be accomplished through long-term care reform.

The counties in the area are aware of the challenges and barriers to integration and long-term care reform including: geographic boundaries, financial risk, less local control, a need for additional staff, and the need to develop an integrated IT system. All of these issues will be addressed during the planning process.

**Planning Partners and Resources:** Consumer involvement is essential in the planning process. The Coalition has identified this as its first priority in the “Planning Outcome” section. Representation from all

target groups will ensure a collaborative environment where consumer ideas and concerns are expressed. There will be a focus on soliciting consumer participation, as well as outreach to consumer groups and advocacy organizations. All of the counties previously listed will be active partners in the planning process and provide in-kind services that will far exceed the grant dollars requested. Richland County's experience in developing and successfully implementing long-term managed care with consumer involvement will provide valuable resources to the Coalition. In addition, CCIA with their many resources can provide valued assistance during the strategic planning process. Crawford, Grant, Iowa, Juneau, Lafayette, and Sauk Counties have Aging Units that exist in a variety of forms; integrating these services would also be a goal of the Coalition. Other groups or organizations may be asked to participate in the planning process as the need indicates. We will seek to work with other grantees to pool resources in order to reach common goals and avoid duplication.

**Coordination/Integration with Current Initiatives:** Richland County has identified the need for well-established relationships between the CMO, Resource Center, and Economic Support and is able to share the process for successful development of these relationships with partnering counties. ADRC's play a vital role in the long-term managed care system. The Coalition plans to coordinate with all ADRC's and Aging Resource Centers that currently exist in the partnering counties. Richland County has the only full service ADRC. Green County is a current recipient of an implementation grant to expand their current ADRC. The Coalition will assist in planning and establishing ADRC services for all Coalition counties, while seeking regional administrative efficiencies in the process. The Richland County CMO is recognized as a successful CMO in Wisconsin and will share the expertise they have developed utilizing the outcome-based Family Care model.

**Readiness for Managed Care:** Each County has decades of experience in providing cost effective long-term support services. All partner counties have met and are willing to plan for managed care. Over the next 18 months the Coalition will develop a plan to provide long-term managed care to elders, and adults with developmental disabilities, and/or physical disabilities. Depending upon state funding, waiting lists and entitlement issues will be addressed.

A significant strength of this proposal is the inclusion of Richland County Health & Human Services. Their past five years of successful operation of Family Care will provide the Coalition with invaluable insight and experience in the establishment and expansion of the same set of services for similar population sets in the additional counties. All counties will have access to the same data system that has helped to make Richland County successful. The counties will be able to integrate those aspects of the administrative functions of a CMO while still being able to retain local responsibility for member care. Richland County stands ready to assist its partner counties in achieving the successful implementation of long-term support managed care in the Coalition to include:

- a. Business Functions—i.e., revenue monitoring and reconciliation, authorization and payment of claims including encounter reporting, incurred but not reported (IBNR) calculations, risk reserve and solvency planning.
- b. Care Management Functions—i.e., outcome based planning, team care management (Social Worker/Registered Nurse/Member), self directed supports, service authorization and notification, collaboration with adult protective services and mental health, transition from waivers to managed care, collaboration with health care providers.
- c. Quality Functions—i.e., member rights and responsibilities, utilization review, quality improvement processes including Best Clinical and Administrative Practices (BCAP).
- d. Provider Network—i.e., quality standards, rate negotiation and contracting, training of providers, capacity of network.
- e. Resource Center—i.e., collaboration with Economic Support Services and managed care entity, streamlined processes for eligibility determination and enrollment.

In the future, the Coalition will work with the region's acute and primary care providers including partnerships and HMO's as well as its mental health providers toward an expansion of managed care to include acute and primary care as well as mental health services.

**Proposed Budget:** The Coalition partners will provide an estimated minimum in-kind match of \$125,000<sup>1</sup> by designating the costs of members of management to assist in the planning process. Paid project staff will include a Planning Project Manager and support staff. The Coalition will draw from its combined resources to provide the expertise needed in the areas of program development and management, IT system expansion, provider networks, fiscal management of a multi-county consortium, and quality assurance/quality improvement. In addition, we will seek to work with other grantees to pool resources to better utilize available funding and avoid duplication.

Description	Total Cost	Deliverables	Timeline
Planning Project Manager	\$63,258	Develop process for consumer input	Apr. 06
Support Staff	\$16,232	Hire Project Manager	Apr. 06
IT Consultant	\$9,000	Develop Governance Structure	Jan. 07
Consumer Involvement Support	\$6,500	ID the scope of Managed Care	Jun. 07
Legal Fees	\$5,010	Create Business and Solvency Plan	Jun. 07
		Define Business Requirements (Financial and IT)	Jun. 07
		Develop ADRC and Economic Support Capacity	Jun. 07
		Develop Comprehensive Implementation Plan for CMO operations	Jun. 07
<b>Total</b>	<b>\$100,000</b>		

<sup>1</sup> In-kind contribution assumes each participating organization will contribute a minimum of 4 hours per week of staff time over an 18 month period, at a cost averaging \$50 per hour.

**Closing:** The goal of the Southwestern Care Management Coalition is to build a high quality, cost effective managed care program for frail elders, adults with developmental disabilities, and adults with physical disabilities in need of long term care. While a largely rural area, the Coalition represents ~5% of the state's population. The Coalition is composed of counties with similar populations, demographics, values, and socio-economics. These similarities enhance each county's ability to have an equal voice in planning for its citizens. The Coalition will build upon its expertise gained from decades of providing cost effective long-term care to develop a successful managed care system. All of the partners in the Coalition look forward to the elimination of waiting lists and the positive outcomes that will be accomplished through long-term care reform. Richland County's five years of success operating Family Care, the many years of successful collaboration demonstrated in a multi-county W-2 Consortium, and the dedication of all partner counties to provide cost effective long-term care for their citizens will assure the successful implementation of the proposed plan.